DEADLINE:

Please return application & supplemental questionnaire in person or by U.S. Mail with a

above date.

4:30 PM

FRIDAY

postmark on or before the NOVEMBER 12, 2004

City-County Employment Office

Your Telepho	one #	E-Mail	Date

SENIOR OFFICE ASSISTANT

MAYOR'S DEPARTMENT - HUMAN RIGHTS COMMISSION Req. #04-0047-CI-2

SUPPLEMENTAL QUESTIONNAIRE

Name	Social Security #

Please allow 2 weeks from the closing date of this position before expecting to receive notice (one way or another) with regards to an interview.

PLEASE READ BEFORE COMPLETING:

The information you provide on this form will be used to further evaluate your training and experience as it relates to the position(s) for which you are applying. Be certain to include: paid employment, military history, volunteer experience, and any educational training and/or experience. NOTE: Please make certain that all employment history and education mentioned on this supplemental questionnaire also appear on your application. We screen all applications based upon the information you, the applicant, provide on these documents only. We do not refer to resumes.

This questionnaire is a supplement to your application and is made a part there of and subject to all terms and conditions noted on the Application for Employment. Remember, you are responsible for the completeness and accuracy of this form as well as the application. Incomplete or omitted information on either of the documents could result in you, the applicant, not receiving full credit for your experience. So please, be as detailed as possible.

CRIMINAL HISTORY CHECKS WILL BE MADE ON TOP CANDIDATES.

last for 1 ERRON	
	City of Lincoln/Lancaster County Workforce Development State Personnel None
2-1.	Do you have experience working in an office setting? Yes, 6 Months - 2 Years experience Yes, 2 Years - 4 Years experience Yes, 4 Years - More experience None
If	yes, please list employer(s), job title and how long you performed these duties. EXPLAIN:
	List the courses that you have completed or are presently taking in the ce/clerical field.
Lis	t: EXPLAIN:

4-1.	Please indicate the types of office equipment you have operated.
	Typerwriter Computer Adding Machine/Calculater Multi-phone line Copier
T.i qt	t others: (i.e. Fax, TDD)
штр	EXPLAIN:
5-1.	Do you have experience maintaining records?
	Yes
_	No
If y	yes, list types. DO NOT LIST FILING SYSTEMS.
	EXPLAIN:
6-1.	Indicate if you have experience in the following.
6-	-2. WordPerfect?
_	Training Only
	=
	Daily
	None
]	If yes, indicate where you acquired this experience. EXPLAIN:

6-3.	Microsoft Word?
	Training Only
	Occasionally
	Daily
Ш	None
If	yes, indicate where you acquired this experience. EXPLAIN:
6-4.	PowerPoint?
	Training Only
	Occasionally
	Daily
	None
ш	none
	EXPLAIN:
6-5.	Microsoft Access?
	Training Only
	Occasionally
	Daily
	None
Ιf	yes, indicate where you acquired this experience.
	EXPLAIN:
	

6-6.	Internet?
	Training Only
	Occasionally
	Daily
	None
If	yes, indicate where you acquired this experience.
	EXPLAIN:
6-7	Other:
□ ,.	
님	Training Only
님	Occasionally
님	Daily
	None
т£	yes, indicate where you acquired this experience.
11	EXPLAIN:
7-1. I	ndicate if you have experience using various filing systems.
7-2.	Alphabetical?
	Occasionally
	Daily
	None
ΙÍ	yes, list employer(s) where you acquired this experience.
	EXPLAIN:

7-3.	Numerical?
	Occasionally
	Daily
	None
Ιf	yes, indicate employer(s) where you acquired this experience.
	EXPLAIN:
7-4.	Chronological?
	Occasionally
	Daily
	None
If	yes, indicate employer(s) where you acquired this experience.
	EXPLAIN:
7-5.	Subject?
_	
	Occasionally Daily
	None
_	Notice
Ιf	yes, indicate employer(s) where you acquired this experience.
	EXPLAIN:
	

8-1. Do you have experience compiling reports? Yes No
If yes, indicate the types of reports and your involvement in their completion. (i.e., collect data, compile, type)
EXPLAIN:
<u></u>
9-1. Do you have public contact experience? Yes No
9-2.
<pre>If yes, please list employer(s). EXPLAIN:</pre>
-
9-3.
<pre>If yes, describe your experience (i.e., phones/walk-ins).</pre>

Ye	Are you fluent in Spanish? es ead peak o
13-2 	2. Are you fluent in Arabic? Yes Read Speak No
13-3 	3. Are you fluent in Vietnamese? Yes Read Speak No
13-4 	4. Are you fluent in American Sign Language? Yes Read Sign No
	Yes Read Speak No ease list other languages:
	EXPLAIN:

14-1. CRIMINAL HISTORY CHECKS will be conducted on the top applicants. In order to perform such checks, the Lincoln Police Department requires the following information. I understand that ALL convictions for any law violation (i.e., DUI, shoplifting, minor in possession, reckless driving, etc.) other than a minor traffic violation (i.e., parking ticket, speeding ticket), including convictions that have been "set aside", "probationed" or "pardoned", must be listed on the front of the application form or on an attached sheet. Consideration is given to the offense and its relationship to the position for which you are applying. Failure to list convictions will be considered to be falsification of your application and result in automatic rejection. [Lancaster County Personnel Rules 5.4(c) and Lincoln Municipal Code 2.76.230(d)]
Last name, First name, Middle name, Birth date, Sex, Other name known as (Ex. maiden name) EXPLAIN:
15-1. Have you listed on the application form ALL jobs and education described on this questionnaire? Yes No